

GOVDOC

BRA

5043

C H A R L E S T O W N

~~BOSTON REDEVELOPMENT AUTHORITY~~  
Library

redevelopment of the

# ***SOUTH COVE***



BOSTON  
PUBLIC  
LIBRARY



a preliminary study by  
the boston housing authority - urban renewal division

South Cove  
365H  
R C.2



BOSTON HOUSING AUTHORITY

Frederick A. Cronin, Chairman  
John Carroll, Vice Chairman  
James J. Mahar, Treasurer  
Owen A. Gallagher, Secretary  
Abner G. Messinger, Member

Francis X. Lane, Administrator

URBAN RENEWAL DIVISION

Kane Simonian, Chief of Urban Renewal  
William J. Johnson, Assistant Chief of Urban Renewal

Planning Staff

Herbert L. Bogen, Chief Planner  
Torsti Kulmala, City Planner  
Harold Ames, Junior Planner  
John Atwood, Junior Planner\*  
John MacKenzie, Draftsman\*

Anne Carroll, Secretary  
Marie Hagopian, Secretary

\* Resigned before publication of report

## SOUTH COVE RENEWAL STUDY - REPORT TO THE BOSTON CITY COUNCIL

Urban Renewal Division - Boston Housing Authority

September, 1956

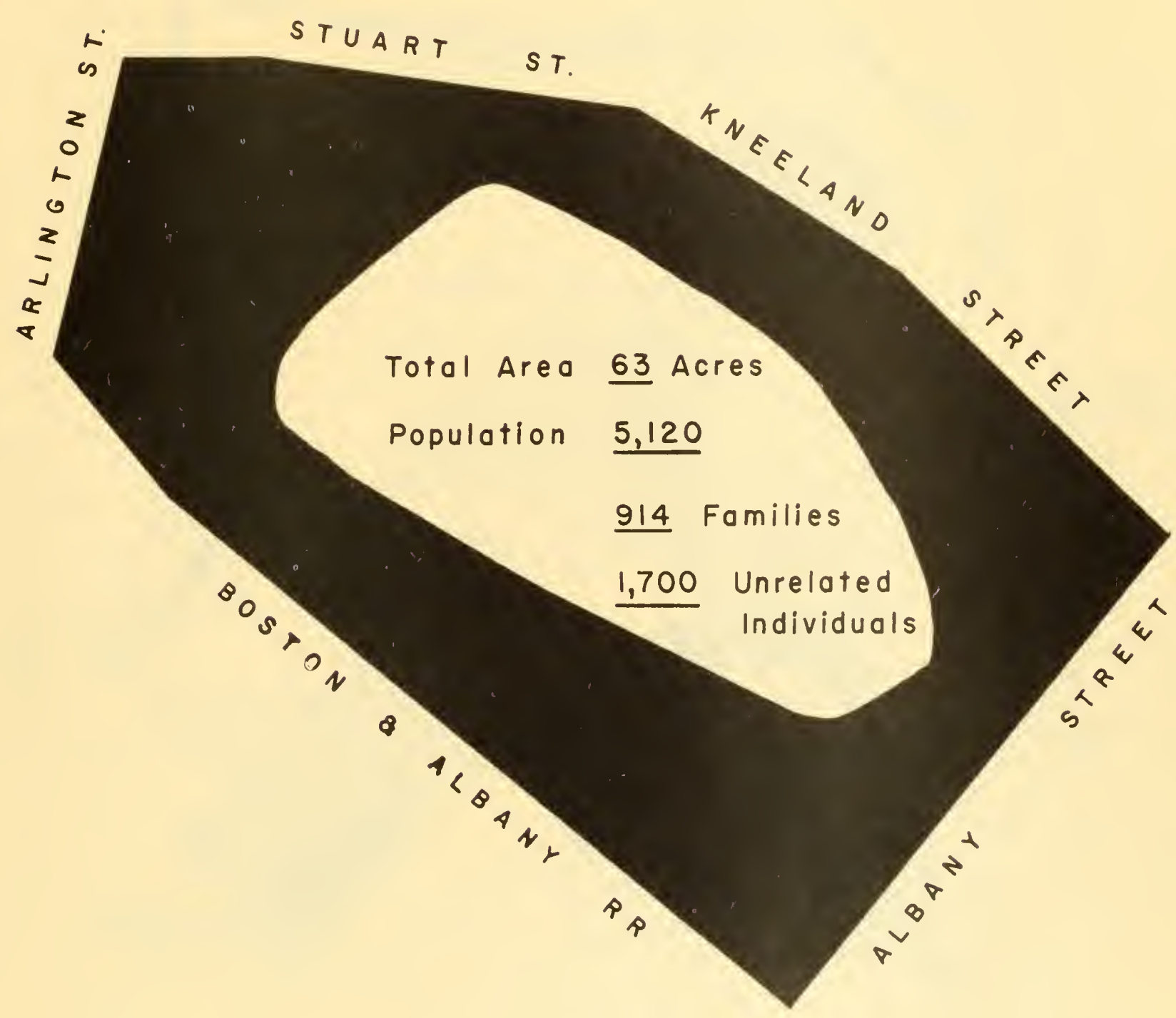
Preliminary studies of a contemplated fourth renewal project in Boston have been completed by the Urban Renewal Division of the Boston Housing Authority. As in the Mattapan, West End and New York Streets projects, it is proposed that renewal take place with Federal aid under Title I of the Federal Housing Act. The basic studies just completed reveal a definite need for renewal of the area and establish its eligibility for Federal assistance under the provisions of this Act. With approval of the Council, application may now be made to the Housing and Home Finance Agency for funds for more advanced survey and planning.

The following report provides a description of the area studied and a summary of some of the conditions found to exist. Where possible the comparative figures for the State and the City of Boston have been included in order to provide a basis for comparison and to illustrate the degree to which the area falls short in providing an adequate living environment. A report such as this can give only a cold and incomplete statistical summary. For those who are suspicious of such statistics, it is suggested that a walk through the area will provide a much more realistic demonstration of the need for renewal.

Included within this report are some indications of a possible direction for an area-wide program of renewal. It must be stressed that these are not proposed re-uses of the area but only those which are presently considered as possibilities. Only after much further study will it be possible to develop a final renewal plan. This report is designed only as a means to indicate the need for such further study in an area offering some of the worst living conditions to be found within the City.



\* THE SOUTH COVE STUDY AREA \*

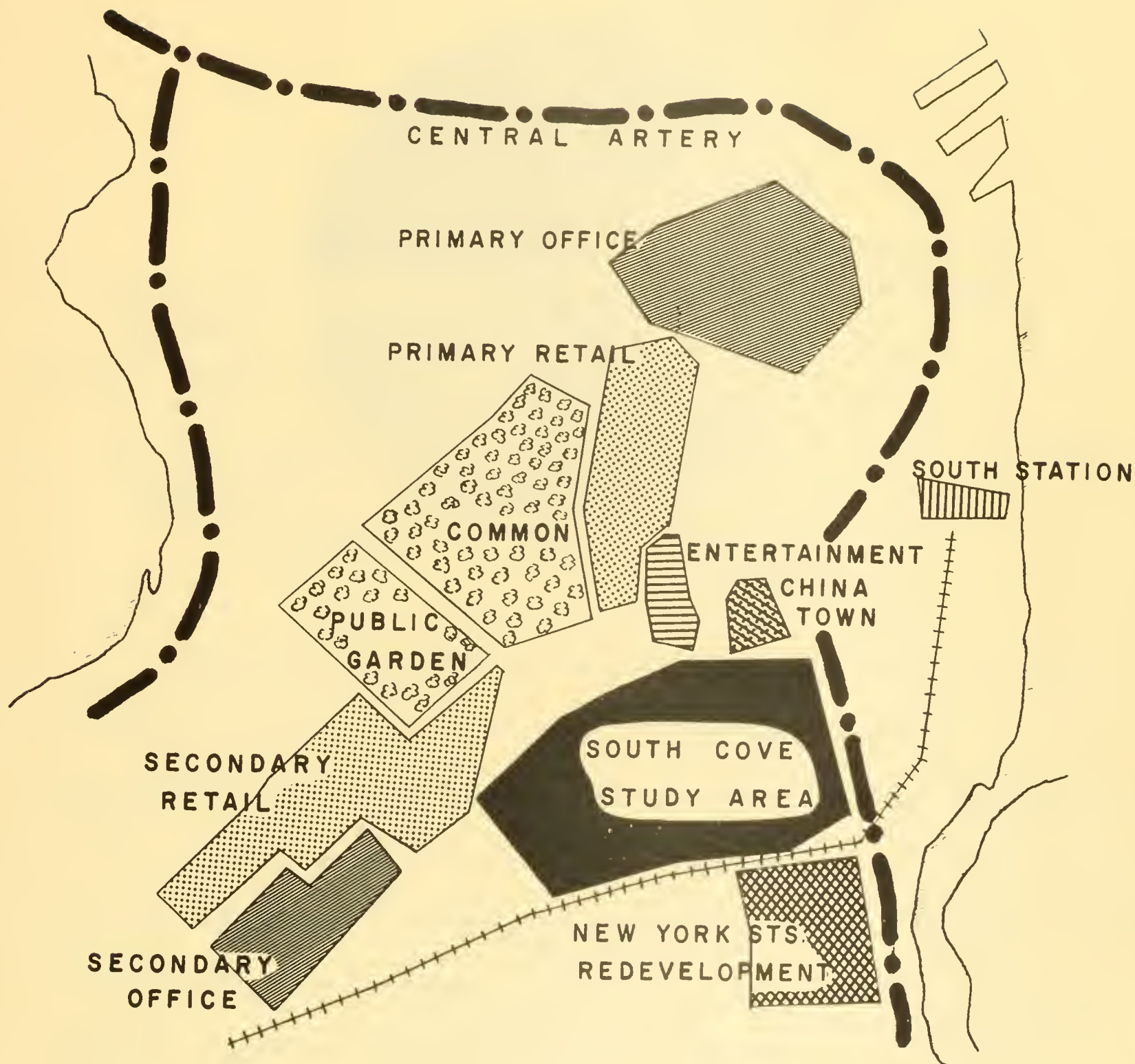


The boundaries shown here are generalized and by no means final. Within this area selected blocks and portions of blocks will not be included in a redevelopment project. It is estimated that within final project boundaries approximately 90% of existing buildings will be demolished. Only after further study will it be possible to establish the final project boundaries and to define the area to be cleared.





- RELATION TO CENTRAL BOSTON -



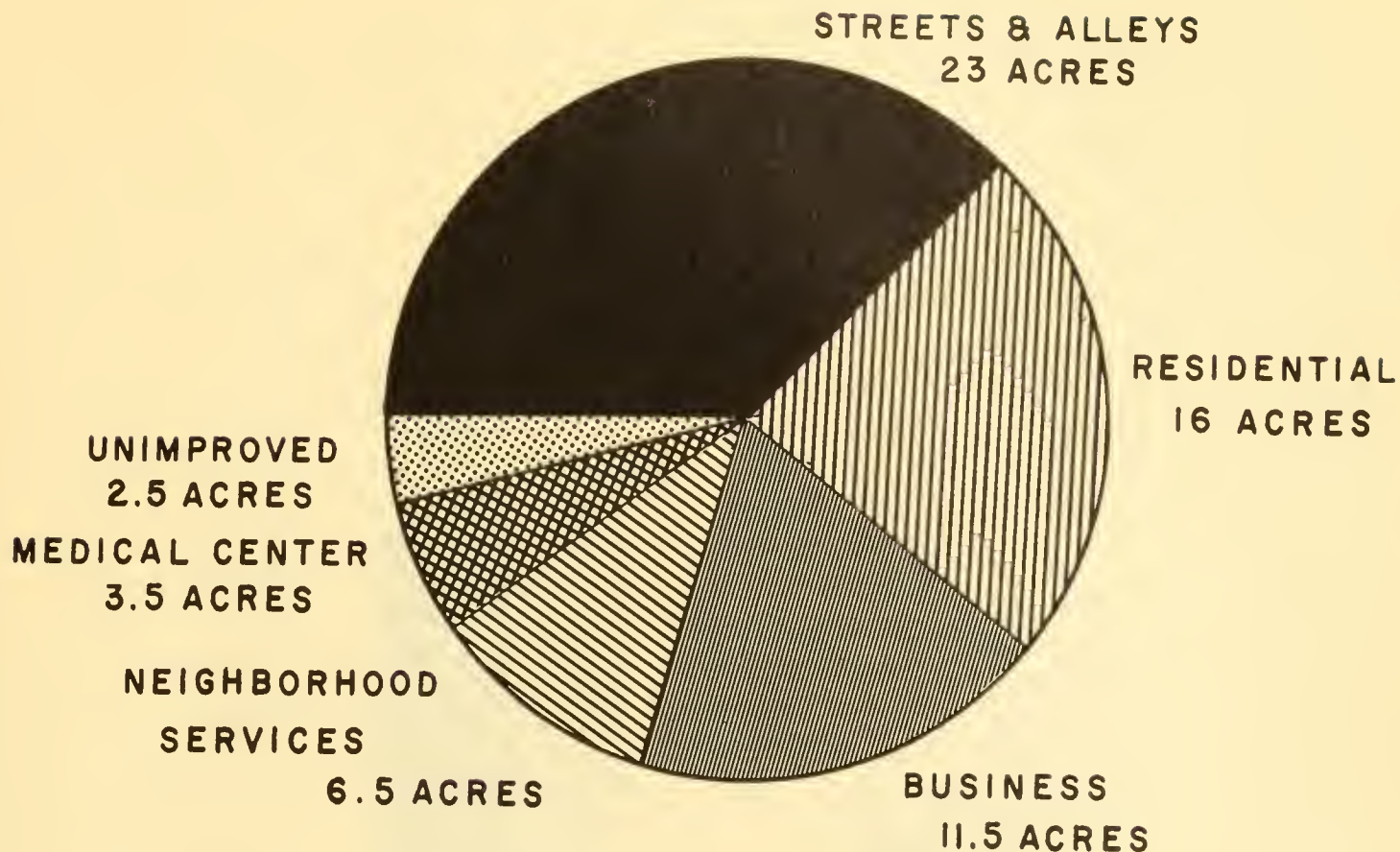
LOCATIONAL ADVANTAGES OF THE SOUTH COVE

- I. The hinge area between the primary and secondary foci of downtown Boston.
- II. Proximity to entertainment, transportation, hotels, shopping, expanding New England Medical Center, Common and Public Garden, etc.
- III. Central Artery will make the area easily accessible to the entire Metropolitan region.





- EXISTING PATTERN OF USE -

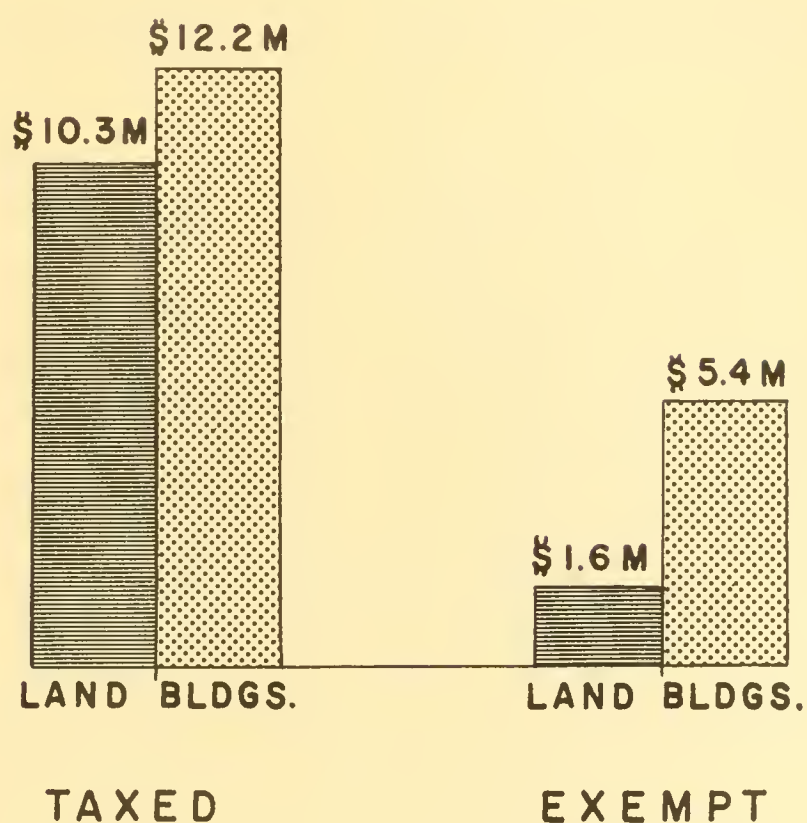


Within the South Cove much of the original mid-nineteenth century development still remains in the form of exhausted houses. For over one hundred years they have served as the homes of successive waves of immigrants, the Chinese being the dominant group now in occupancy. The fringes of the area have been developed with a mixture of stores, warehouses, office buildings, factories, theaters, apartments and lodginghouses. In recent years open parking lots have appeared throughout the area on the sites of demolished housing. New building has been limited to the growing New England Medical Center, in the eastern sector, and regional film distributors on the western edge.

Over one-third of the total area is used for an outmoded and inadequate system of streets and alleys. Neighborhood services are provided for a population long removed from the area. In general they are antique, poorly related to the area being served, and occupy more space than is currently needed.



- ASSESSED VALUATIONS -



Total assessed value of the study area has shown a general decline and now stands at approximately \$29.5 million. Of the seven million in tax-exempt properties, mainly in Medical Center use, the ratio of building value to land value is 3.3 to 1, while the same ratio for the taxed properties is 1.2 to 1. Such a low ratio is a ready index of improper development and a strong indication of the ripeness of the area for renewal. With a fully developed Medical Center exerting a stabilizing influence on values, it is to be expected that renewal of the area will result in a considerable increase in tax income due mainly to the increase in this ratio of building value to land value.





\* THE ENVIRONMENT AND ITS EFFECTS \*

INDICATIONS OF THE NEED FOR REDEVELOPMENT

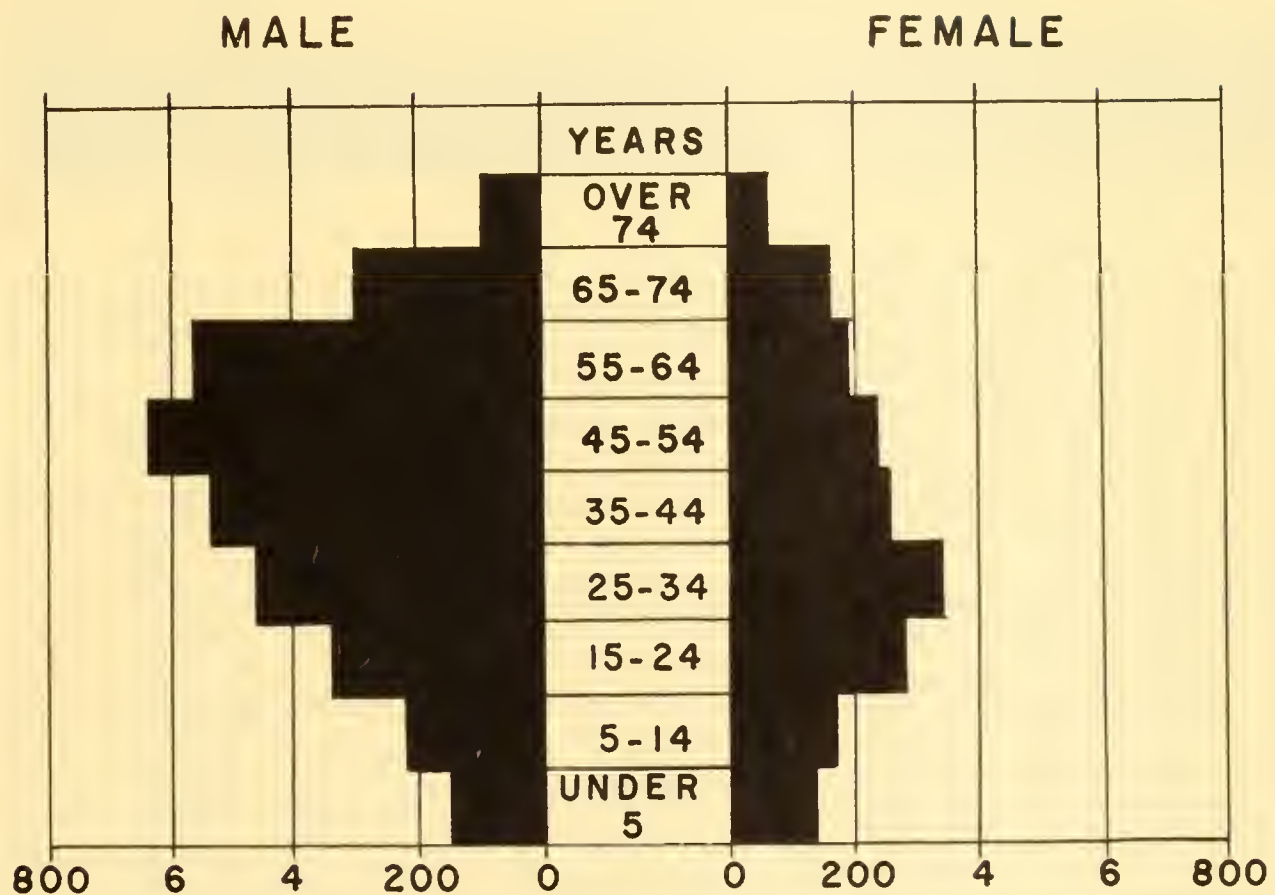
- I. Mixed and shifting land uses.
- II. Declining land and floor space values.
- III. Outdated street system.
- IV. Replacement of housing by open parking lots.
- V. Declining assessed valuations.
- VI. Aged and substandard housing. Overcrowding.
- VII. Low Income
- VIII. Low rents.
- IX. Poor health.
- X. High mobility of population.
- XI. No prospect for an automatic self-generating renewal.





- POPULATION -

Age/Sex Composition

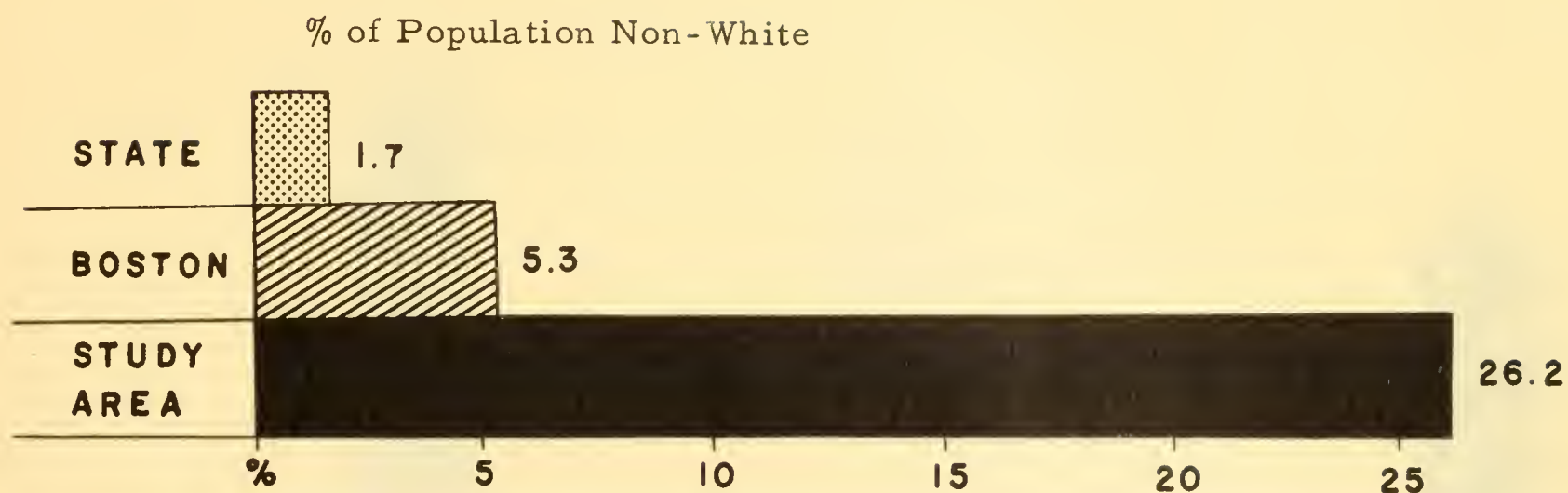


This diagram presents a clear picture of the imbalance which exists in the age/sex composition of the population in the South Cove study area: a picture of a large proportion of unrelated individuals living alone, a dominant group of males from 35-65 years of age, and an outnumbering of females by almost 2-1. In its present form the area can hardly be considered a desirable location for family living.

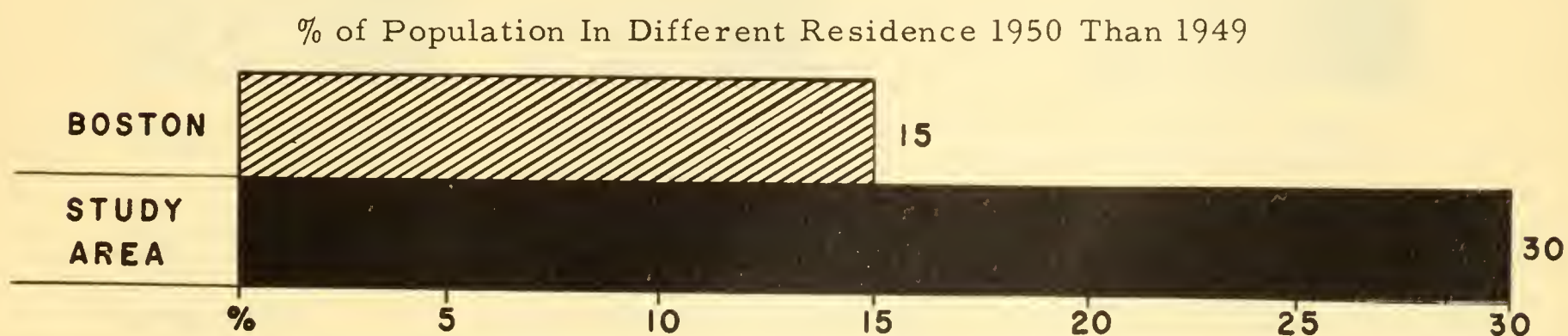
NO



- POPULATION -



The Chinese are by far the dominant group in those classified by the census as non-white. Approximately one-half of the Chinese in the Metropolitan Area live within the study area or its immediate neighborhood. The nearby stores and restaurants of Chinatown serve as a center for the Chinese population of a large region. Proximity to these businesses, difficulties of language or custom, and the antipathy of the general society have resulted in strong community ties which keep the group together.

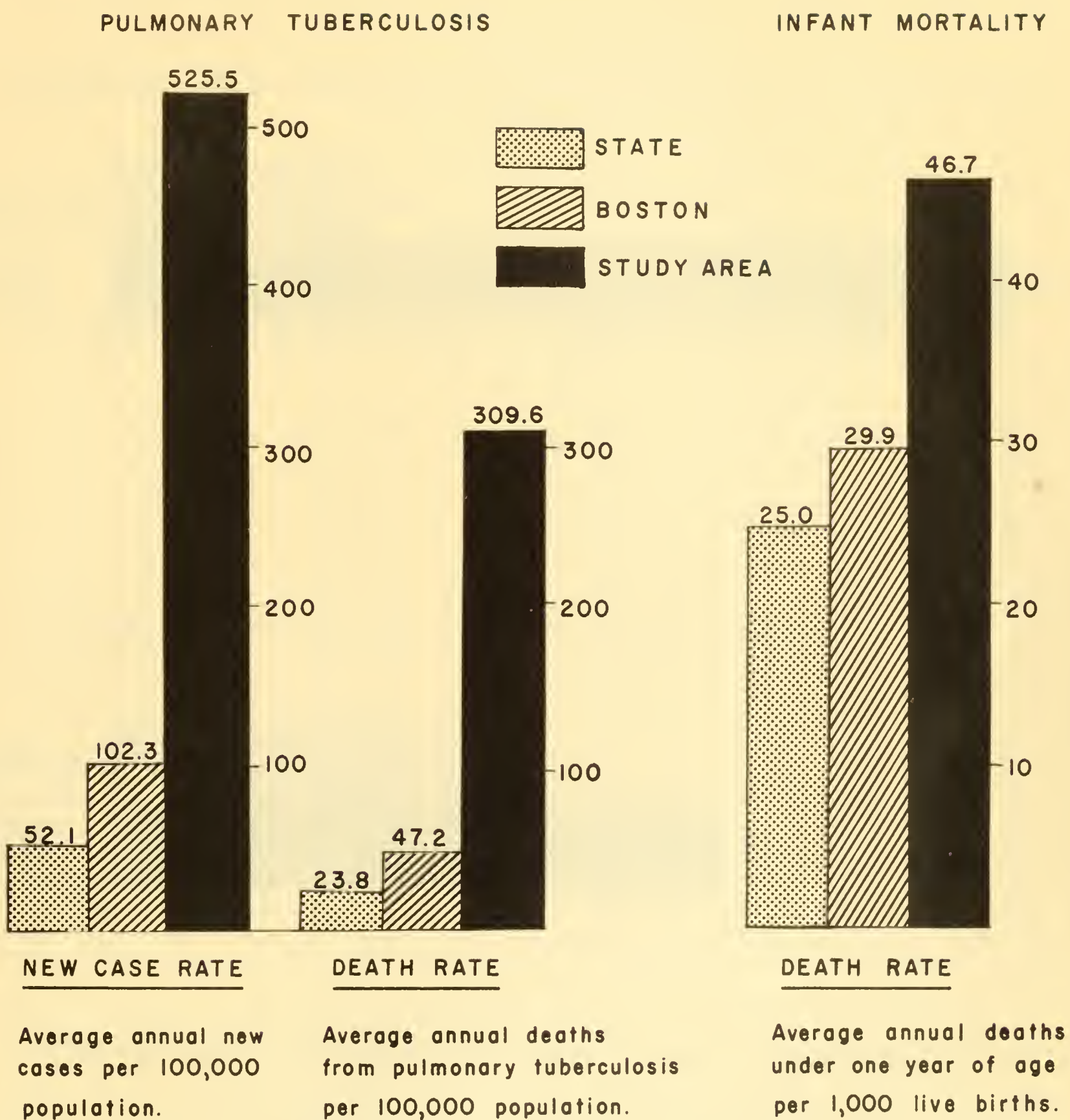


In sharp contrast to the stability of the Chinese community is the mobility of much of the remaining population. The configuration of the chart above is to be expected in considering the age/sex pyramid on the preceding page. The dominant group of middle-aged, unrelated males of that pyramid are the drifters who are constantly on the move from one depressed area to another. In spite of the inclusion of the stable Chinese population, the study area still exhibits a rate of mobility just double that of the entire city.





- POPULATION -



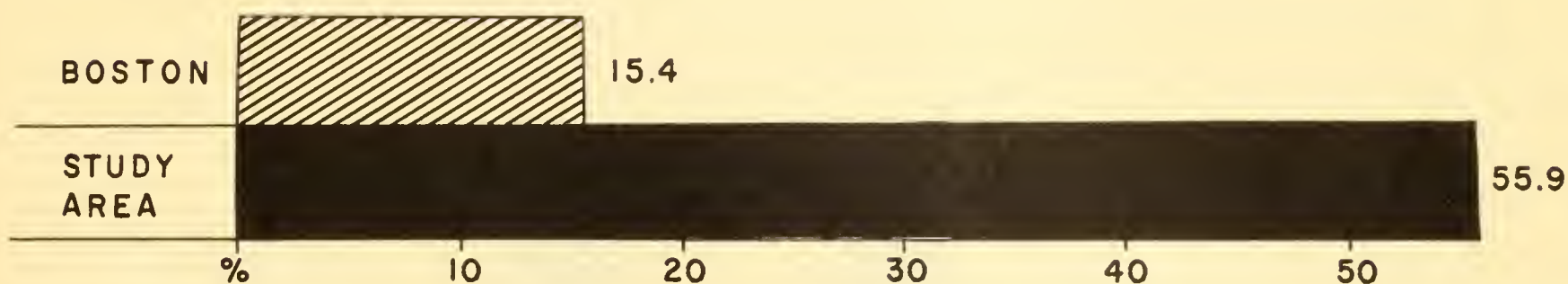
These are but three indications of the effects of the South Cove environment upon the health of the people. In each case the study area is found to have rates considerably higher than those of the state and city, and, in fact, the death rate from pulmonary tuberculosis is one of the highest in the country. The crude birth rate of the South Cove is approximately 25% below that of the City, while the death rate is 75% above.



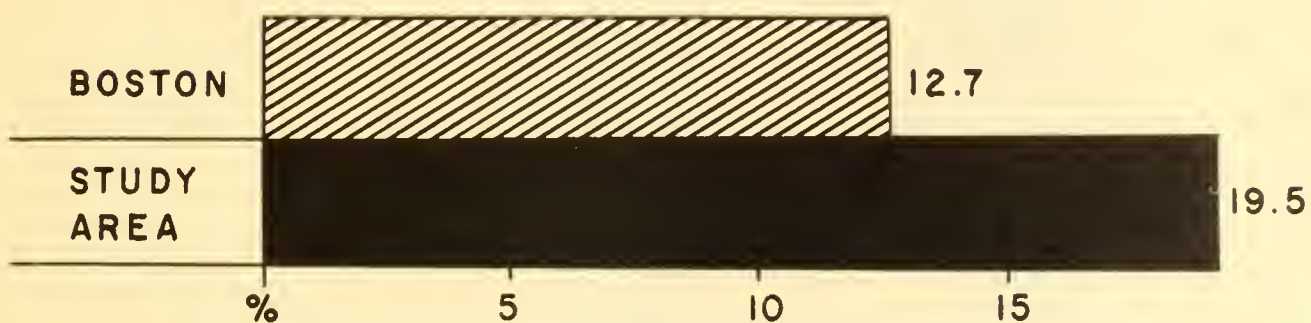


- HOUSING -

% of Dwelling Units With No Private Bath, No Running Water, or Dilapidated



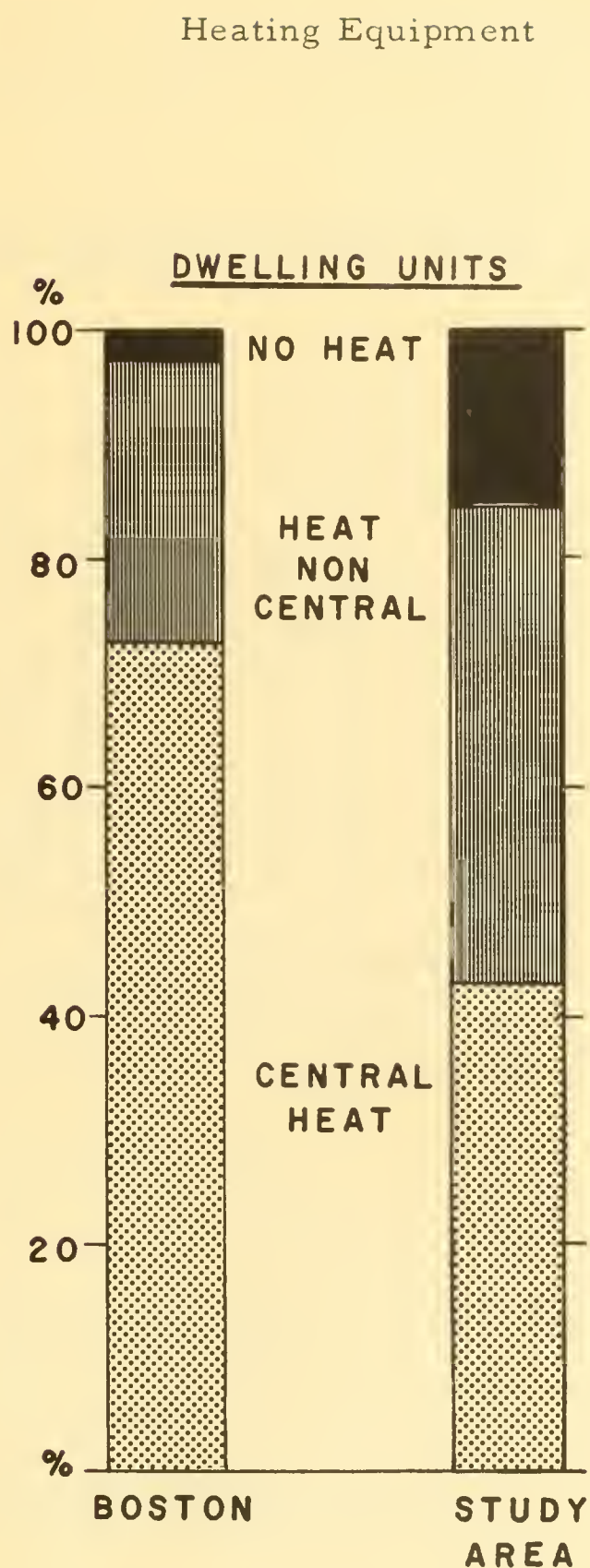
% of Dwelling Units With More Than One Person Per Room



The housing of the study area consists of nineteenth century closely packed three and four story walkups of timber frame and brick wall. 49% of the residential structures are substandard by the most lenient of measures, while 39% of all structures must be termed substandard. The replacement of housing by open parking lots in recent years has taken place at a higher rate than the movement of people from the area with the result that greater pressures have been placed upon remaining housing facilities and the incidence of overcrowding has increased.



## - HOUSING -



Although there have been attempts to refurbish some of the housing within the area adjacent to the Medical Center, they are expensive and greatly limited by what exists to work with. Hundred-year-old structures, lacking in such basic equipment as adequate plumbing or heating facilities, suggest that the only money which may intelligently be spent on them at this time is that required for demolition.





\* PROSPECTS FOR SUCCESSFUL REDEVELOPMENT \*

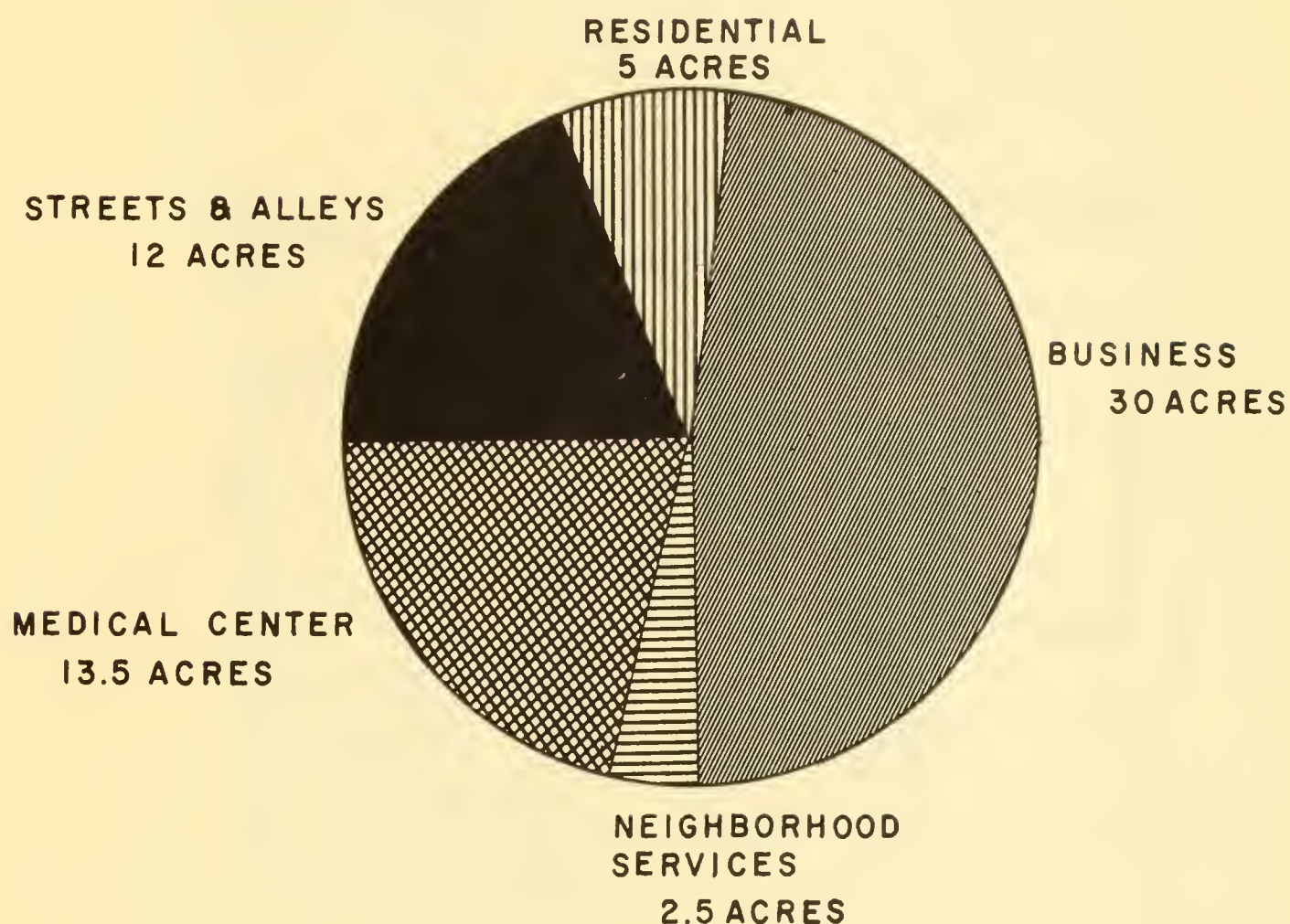
POSSIBLE RE-USES OF SUCH AN AREA

- I. Expansion of existing Medical Center.
- II. Specialty retail.
- III. Consumer hard goods retail.
- IV. Offices
- V. Regional distributors.
- VI. Hotel.
- VII. Convention and exhibition.
- VIII. Housing and neighborhood facilities.
- IX. Parking garages.
- X. Merchandise mart.
- XI. Communications.
- XII. Entertainment.
- XIII. Transportation terminal.





- POSSIBLE RE-USE PATTERN -



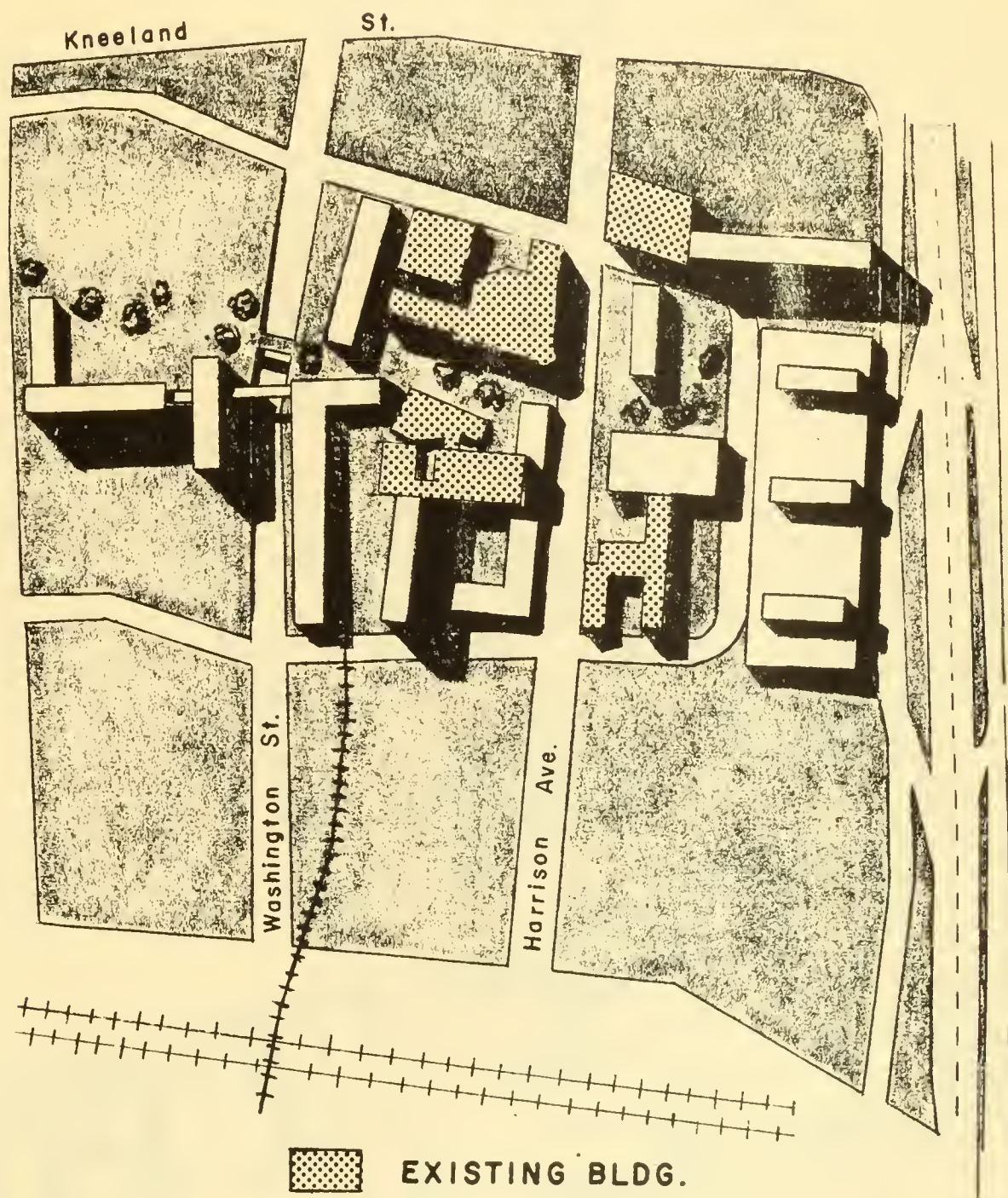
At this stage of study it is possible only to speculate, in the most general terms, upon the possible pattern of re-use in such an area. Activities immediately adjacent, such as the New York Streets redevelopment and the Central Artery, serve to make the area desirable for a growing number of functions.

Consistent with the experience in other redevelopment projects, it is anticipated that the land area used for streets and alleys will be cut in half. In the above pattern the results of a study of Medical Center needs have been recognized in providing 10 additional acres for that use. An area for residential development and neighborhood services is provided in anticipation of the desire of the Chinese community to remain in the area. This would make the remaining 30 acres available for private commercial uses and public community services.





- PROPOSED DEVELOPMENT OF THE NEW ENGLAND MEDICAL CENTER -



This sketch, taken from a study of the Medical Center development in the South Cove by Kevin Lynch, planning consultant, illustrates the proposed character of site development within such a center. The sketch is not meant to illustrate definite building shapes and locations but rather to fix certain circulation and open space features as well as the general character of siting which is recommended. On the following page this same principle is applied to the entire study area and the adjoining New York Streets redevelopment project.





- GENERAL CHARACTER OF REDEVELOPMENT -







## References. . . . .

U. S. Census of Population, Boston, Mass. 1950 U. S. Dept. of Commerce

U. S. Census of Housing, Boston, Mass. 1950 U. S. Dept of Commerce

Neighborhoods of Boston Ranked for Selected Factors. 1953

Research Division United Community Services of Metropolitan Boston.

Medical Center in The South Cove 1955 Kevin Lynch

Optimal Land Re-use Analysis - New England Medical Center Redevelopment

Study - prepared for Kevin Lynch by Thomas Atwater Jr.

Because the area being studied does not coincide exactly with the neighborhoods of the Community Services study, nor with the area covered by the Medical Center report, it was necessary to pro-rate the statistics from these reports in order to get the figures which more accurately apply to the study area. 75% of the study area falls within the boundaries of the South Cove neighborhood, as established by the Community Services report, and 25% within the North Tremont neighborhood. Data from the census reports was used on the basis of 54% of the dwelling units of census tract G1 falling within the study area, as well as 92% of G2, 80% of G3, 100% of G4, and 19% of J1.





Renewal Study

B65H R

SOUTH COVE

DATE	ISSUED TO
4/8/76	Mertens

